

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	S.I.O.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TH	20 955	5/5 06-07-01
RESPONSE FORMALITY REVIEW	A	676	10/22/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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C-C  
 06-11-01